

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS  | ID NO.            | DATE           |
|---------------------------|-----------|-------------------|----------------|
| FEE DETERMINATION         | <i>DS</i> | <i>2000-03-00</i> |                |
| O.I.P.E. CLASSIFIER       |           |                   |                |
| FORMALITY REVIEW          |           |                   |                |
| RESPONSE FORMALITY REVIEW | <i>AS</i> | <i>4622</i>       | <i>7-30-00</i> |

*09/575104*

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim          | Date            |
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| Final Original |                 |
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| Claim          | Date |
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| Claim          | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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